

**SUPPLEMENTAL DECLARATION  
FOR REISSUE  
PATENT APPLICATION  
TO CORRECT "ERRORS" STATEMENT  
(37 CFR 1.175)**

Attorney Docket Number	SPRAGUE-REI-1
First Named Inventor	William R. Sprague
<b>COMPLETE</b>	
Application Number	09/458,132
Filing Date	February 16, 2000
Art Unit	3629
Examiner Name	Fisher, Michael J.

I/We hereby declare that:

Every error in the patent which was corrected in the present reissue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

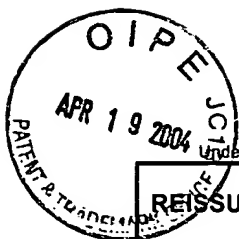
<b>Name of Sole or First Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
William R.		SPRAGUE	
Inventor's Signature	<i>William R. Sprague</i>	Date	3/30/04
<b>Name of Second Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Steven W.		SPRAGUE	
Inventor's Signature	<i>Steven W. Sprague</i>	Date	3/30/04
<b>Name of Third Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
<b>Name of Fourth Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	

☐ Additional inventors or legal representatives(s) are being named on the \_\_\_\_\_ supplemental sheets PTO/SB/02A or 02LR attached hereto.

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

SPRAGUE-REI-1

I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 5,842,629, granted December 1, 1998 and for which a reissue patent is sought on the invention entitled VERI MAG PACK

the specification of which

☐ is attached hereto.☒ was filed on February 16, 2000 as reissue application number 09/458,132

and was amended on February 16, 2000, December 15, 2000, July 6, 2001, December 3, 2001,  
March 27, 2002, August 6, 2002, October 9, 2002, January 9, 2003  
(if applicable)

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

☐ I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☒ by reason of a defective specification or drawing.☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

1. The patentees claimed less than they had the right to claim in the patent. In particular, all issued claims of the '629 patent require "a line of perforations at...the...bottom of the package, the bottom line of perforations intersecting the die cut transparent cellophane window to provide a quick release feature that exposes a portion of the data card". The bottom perforation is a features only of one illustrated embodiment and constitutes an unnecessary limitations. New claims 17 and 18 have been added in this reissue application to eliminate the presence of perforations along the bottom of the card, broadening the claims to "a line of perforations at the top and along one side of the package."

2. There are defects in the specification. In particular, there are various grammatical and punctuation errors in need of correction.

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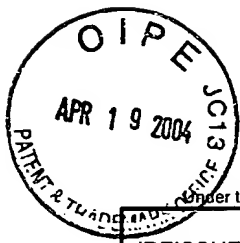
This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)  
SPRAGUE-REI-1

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.

Note: To appoint a power of attorney, use form PTO/SB/81.

Correspondence Address: Direct all communications about the application to:

☐ Customer Number:

OR

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APR 26 2004  
**GROUP 3600**

<input checked="" type="checkbox"/> Firm or Individual Name	Law Offices of Royal W. Craig				
Address	10 North Calvert Street, Suite 153				
Address					
City	Baltimore	State	Maryland	Zip	21202
Country	USA				
Telephone	410 385-2383	Fax	410 385-2385		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name) William R. Sprague

Inventor's signature <i>William R. Sprague</i>	Date 3/30/04
Residence 3254 Murray Road, Finksburg, MD 21048	Citizenship US
Mailing Address 3254 Murray Road, Finksburg, MD 21048	

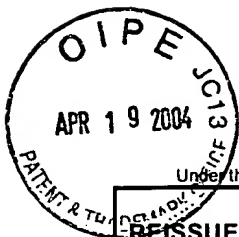
Full name of second joint inventor (given name, family name) Steven W. Sprague

Inventor's signature <i>Steven W. Sprague</i>	Date 3/30/04
Residence 16605 Winterwoods Ct, Rockville, MD 20853	Citizenship US
Mailing Address 16605 Winterwoods Ct, Rockville, MD 20853	

Full name of third joint inventor (given name, family name)

Inventor's signature	Date
Residence	Citizenship
Mailing Address	

☐ Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.



<b>REISSUE APPLICATION DECLARATION BY THE ASSIGNEE</b>		Docket Number (optional) SPRAGUE-REI-1	
I hereby declare that:  The residence, mailing address and citizenship of the inventors are stated below.  I am authorized to act on behalf of the following assignee: <u>Sprague Licensing Company</u>  and the title of my position with said assignee is: <u>President</u>  The entire title to the patent identified below is vested in said assignee.			
Inventor <u>William R. Sprague</u>		Citizenship <u>US</u>	<b>RECEIVED</b>  <b>APR 26 2004</b>  <b>GROUP 3600</b>
Residence/Mailing Address <u>3254 Murray Road, Finksburg, MD 21048</u>			
Inventor <u>Steven W. Sprague</u>		Citizenship <u>US</u>	
Residence/Mailing Address <u>16605 Winterwoods Ct, Rockville, MD 20853</u>			
<input type="checkbox"/> Additional Inventors are named on separately numbered sheets attached hereto.			
Patent Number <u>5,842,629</u>		Date of Patent Issued <u>12-01-1998</u>	
Title of Invention <u>VERI MAG PACK</u>			
I believe said inventor(s) to be the original and first inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled: <u>VERI MAG PACK</u>			
the specification of which  <input type="checkbox"/> is attached hereto. <input checked="" type="checkbox"/> was filed on <u>February 16, 2000</u> as reissue application number <u>09 / 458,132</u>  and was amended on <u>February 16, 2000, December 15, 2000, July 6, 2001, December 3, 2001, March 27, 2002, August 6, 2002, October 9, 2002, January 9, 2003</u> (If applicable)			
I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.			
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.			
<input type="checkbox"/> I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.			
I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)			
<input type="checkbox"/> by reason of a defective specification or drawing.			
<input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.			
<input checked="" type="checkbox"/> by reason of other errors.			

[Page 1 of 2]

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PTO/SB/52 (07-03)

Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**REISSUE APPLICATION DECLARATION BY THE ASSIGNEE**

Docket Number (Optional)

At least one error upon which reissue is based is described as follows:

1. The patentees claimed less than they had the right to claim in the patent. In particular, the patentees included unnecessary limitations directed to the material of which the package is made, the manner in which it is imprinted, the presence of perforations, and the composition of the transparent window.
2. There are defects in the specification. In particular, there are grammatical and punctuation errors.

[Attach additional sheets, if needed.]

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.

I hereby appoint:



Practitioners at Customer Number:

OR



Practitioner(s) named below:

Name	Registration Number
Royal W. Craig	34,145

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Correspondence Address: Direct all communications about the application to:



Customer Number:

OR



Firm or Individual Name

LAW OFFICES OF ROYAL W. CRAIG

Address 10 North Calvert Street, Suite 153

Address

City Baltimore State Maryland Zip 21202

Country UNITED STATES OF AMERICA

Telephone (410) 385-2383 Fax (410) 385-2385

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of person signing (given name, family name) Steven W. Sprague

Signature

Date

3/30/04

Address of Assignee 220 Business Center Drive

3254 Murray Rd

Reisterstown, Maryland 21136

Finksburg, Maryland 21048